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REPORT OF RECEIPTS

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FORM 3		DISBURSEMENTS An Authorized Committee	Office Use Only
NAME OF OMMITTEE (in full)	TYPE OR PRINT	Example: If typing, type over the lines.	15_JUL_15_PH 4: 35
iends of Patrick	Murphy		
DRESS (number and st	reet) 4521 PGA Blvd.	#412	
Check if different than previously reported. (ACC) FEC IDENTIFICATION	Palm Beach Gar CITY NUMBER 3. IS THI REPORT	STATE ZII	P CODE STATE DISTRICT FL
TYPE OF REPORT (Choose One)		
(a) Quarterly Reports:	(b) 12-Day PRE-Election Report for the:	
☐ April 15 Quarterly ✓ July 15 Quarterly ☐ October 15 Quart ☐ January 31 Year-	Report (Q2) erly Report (Q3)	Primary (12P) General (Convention (12C) Special (
☐Termination Repo	ļ	c) 30-Day POST-Election Report for the	e: inoff (30R) Special (30S) in the State of State of
Covering Period Certify that I have exami	04/01/2015 ned this Report and to the	through 06/30/2015 best of my knowledge and belief it is true	e, correct and complete.
Type or Print Name of Tr	easurer Brian Fou	cart	
Signature of Treasurer	/b-		Date 2 · 15 · 15
	lse, erroneous, or incompl	ete information may subject the person s	igning this Report to the Penalties of 2 U.S.C. 437g.
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